



PART B - FEE(S) TRANSMITTAL

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29989 7590 03/31/2006

HICKMAN PALERMO TRUONG & BECKER, LLP
2055 GATEWAY PLACE
SUITE 550
SAN JOSE, CA 95110

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Annette Valdivia	(Depositor's name)
<i>Annette Valdivia</i>	
(Signature)	
6/27/06	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/483,724	01/14/2000	Sharon S. Liu	15437-112	8756
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TITLE OF INVENTION: MECHANISM FOR DYNAMICALLY CONSTRUCTING CUSTOMIZED IMPLEMENTATIONS TO ENFORCE RESTRICTIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400	\$0	\$1400	06/30/2006
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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TRUONG, THANHNGA B	2135	713-182000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list <input type="checkbox"/> 09/483,724, <i>Hickman Palermo Truong & Becker, LLP</i> , <i>6/27/06</i> , <i>RESHANE B. TRUONG</i> , <i>15437-112</i> , <i>8756</i> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> 01 FC:1501 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<input type="checkbox"/> <i>6/27/06</i> 2. <i>Bobby K. Truong</i> 3. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE <i>Sun Microsystems, Inc.</i>	(B) RESIDENCE: (CITY and STATE OR COUNTRY) <i>Santa Clara, CA</i>
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

<input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): <input checked="" type="checkbox"/> A check in the amount of the fee(s) is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number <i>50-1302</i> (enclose an extra copy of this form).
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
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Authorized Signature _____

Typed or printed name *CHRISTIAN NICHOLAS*

Date _____

6/22/06

Registration No. _____

50266

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